C/007/042 Incoming
cc: Steve D.

Sunnyside Cogeneration Associates

P.O. Box 10, East Carbon, Utah 84520 • (435) 888-4476 • Fax (435) 888-2538

January 26, 2015

Daron Haddock
Division of Oil, Gas & Mining
1594 W. North Temple, Suite 1210
Salt Lake City, Utah 84116

RE: Annual 2014 Inspection Report
Star Point Refuse Pile C/007/042

Dear Mr. Haddock:

Please find enclosed a copy of the Annual 2014 Inspection Report for the Star Point refuse pile, impoundments, and excess spoil area.

Should you have any questions, please contact Rusty Netz or myself at (435)888-4476.

Thank You,

Gerald Hascall

Gerald Hascall
Agent For
Sunnyside Cogeneration Associates

c.c. Rusty Netz
Plant File

QUARTERLY INSPECTION FORM – IMPOUNDMENT

Permit Number:	C/007/042	Inspection Date:	Dec 17, 2014
Mine Name:	Star Point Waste Fuel		Annual 2014
Mine Operator (Permittee):	Sunnyside Cogeneration Associates	Inspector:	Rusty Netz
MSHA ID Number:	N/A	Signature:	Rusty Netz
Impoundment Name:	**Sediment Pond #005**		
UPDES Permit Number:	UTG040025		

IMPOUNDMENT INSPECTION

1. Describe any appearance of any instability, structural weakness, or any other hazardous condition.

None

a. Sediment storage capacity, including elevation of 60% and 100% sediment storage volumes, and estimated average elevation of existing sediment.

Total Pond Volume = 6.96 Acre-feet
Pond bottom elevation = 7387.3
100% Sediment Storage Volume = 2.42 acre-feet at Elevation 7394.9
60% sediment Storage Volume = 1.45 acre feet at Elevation = 7393
Existing Average Sediment Elevation = 7391 +/-

b. Principle and emergency spillway elevations.

Primary Dewatering Orifice = 7394.9
Emergency Spillway Elevation = 7401.3

2. Field Information

Provide current water elevation, whether pond is discharging, type and number of samples taken, monitoring/ instrumentation information, inlet/ outlet conditions, or other related activities associated with the pond including but not limited to sediment cleanout, pond decanting, embankment erosion/ repairs, monitoring information, vegetation on outslopes of embankments, etc.

Pond had no water in it at time of inspection. Storms in late September caused a discharge. Samples were taken at that time and test results from that discharge are attached here.
Sediment levels were reasonably low.
Embankment conditions were good. Vegetation on outslopes was adequate.
Inlet / Outlet conditions were good. No structural or hazardous conditions were observed.

3. Field Evaluation.

Describe any changes in the geometry of the impounding structure, average and maximum depths and elevation of impounded water, estimated sediment or slurry volume and remaining storage capacity, estimated volume of water impounded, and any other aspect of the impounding structure affecting its stability or function which has occurred during the reporting period

No recent changes in the geometry of the structure have been observed
No water was impounded. Sediment level was good.
No other aspects were observed to affect stability or functionality.

QUARTERLY INSPECTION FORM – IMPOUNDMENT

Sediment Pond 005

CERTIFIED REPORT
IMPOUNDMENT EVALUATION

If you answer NO to these questions, please explain under comments

1. Is impoundment designed and constructed in accordance with the approved plan? YES
2. Is impoundment free of instability, structural weakness, or any other hazardous conditions? YES
3. Has the impoundment met all applicable performance standards and effluent limitations from the previous date of inspection? YES

COMMENTS/ OTHER INFORMATION

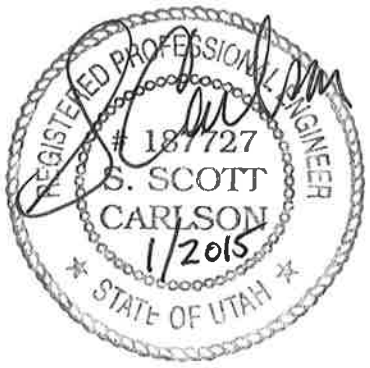
Although a discharge did occur from Pond 5 as a result of multiple storms in late September, sample analysis indicates that adequate detention time occurred and the state discharge limitations were not exceeded.

CERTIFICATION STATEMENT:

I hereby certify that: I am experienced in the construction of impoundments; I am qualified and authorized in the State of Utah to inspect and certify the condition and appearance of impoundments in accordance with the certified and approved designs for this structure; that the impoundment has been maintained in accordance with approved designs and meets or exceeds the minimum design requirements under all applicable federal, state and local regulations; and that inspections and inspection reports are made by myself or under my direction and include any appearances of instability, structural weakness or other hazardous conditions of the structure affecting stability in accordance with the Utah R645 Coal Mining Rules.

By: S. Scott Carlson, PE, Twin Peaks, P.C.
P.E. Number & State: 187727 UTAH

Affix Signature, Stamp and Date



QUARTERLY INSPECTION FORM – IMPOUNDMENT

Permit Number: C/007/042
Mine Name: Star Point Waste Fuel
Mine Operator (Permittee): Sunnyside Cogeneration Associates
MSHA ID Number: N/A
Impoundment Name: **Sediment Pond #006**
UPDES Permit Number: UTG040025

Inspection Date: Dec 17, 2014
Annual 2014
Inspector: Rusty Netz
Signature: Rusty Netz

IMPOUNDMENT INSPECTION

1. Describe any appearance of any instability, structural weakness, or any other hazardous condition.

None

a. Sediment storage capacity, including elevation of 60% and 100% sediment storage volumes, and estimated average elevation of existing sediment.

Total Pond Volume = 2.6 Acre-feet
Pond bottom elevation = 7132.7
100% Sediment Storage Volume = 0.76 acre-feet at Elevation 7140.7
60% sediment Storage Volume = 0.45 acre feet at Elevation = 7138.8
Existing Average Sediment Elevation = 7138.6 +/-

b. Principle and emergency spillway elevations.

Primary Dewatering Orifice = 7140.7
Emergency Spillway Elevation = 7147.2

2. Field Information

Provide current water elevation, whether pond is discharging, type and number of samples taken, monitoring/ instrumentation information, inlet/ outlet conditions, or other related activities associated with the pond including but not limited to sediment cleanout, pond decanting, embankment erosion/ repairs, monitoring information, vegetation on outslopes of embankments, etc.

Pond had no water. No samples were taken
Sediment levels were reasonable. Pond did not require decanting.
Embankment conditions were good. Vegetation on outslopes was adequate.
Inlet / Outlet conditions were good. No structural or hazardous conditions were observed.

3. Field Evaluation.

Describe any changes in the geometry of the impounding structure, average and maximum depths and elevation of impounded water, estimated sediment or slurry volume and remaining storage capacity, estimated volume of water impounded, and any other aspect of the impounding structure affecting its stability or function which has occurred during the reporting period

No recent changes in the geometry of the structure have been observed
No water was impounded
Sediment level was reasonable
No other aspects of the impounding structure were observed that could affect its stability or functionality.

QUARTERLY INSPECTION FORM – IMPOUNDMENT

Sediment Pond 006

CERTIFIED REPORT
IMPOUNDMENT EVALUATION

If you answer NO to these questions, please explain under comments

1. Is impoundment designed and constructed in accordance with the approved plan? YES
2. Is impoundment free of instability, structural weakness, or any other hazardous conditions? YES
3. Has the impoundment met all applicable performance standards and effluent limitations from the previous date of inspection? YES

COMMENTS/ OTHER INFORMATION

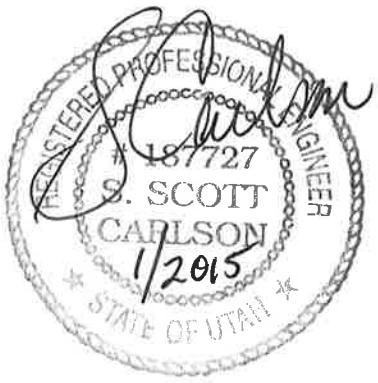
The upstream riprap lined ditch which conveys undisturbed area runoff around Pond 006 incurred a breach in September which routed this runoff into Pond 006. This water was all contained in Pond 006, and the ditch was repaired in October.

CERTIFICATION STATEMENT:

I hereby certify that: I am experienced in the construction of impoundments; I am qualified and authorized in the State of Utah to inspect and certify the condition and appearance of impoundments in accordance with the certified and approved designs for this structure; that the impoundment has been maintained in accordance with approved designs and meets or exceeds the minimum design requirements under all applicable federal, state and local regulations; and that inspections and inspection reports are made by myself or under my direction and include any appearances of instability, structural weakness or other hazardous conditions of the structure affecting stability in accordance with the Utah R645 Coal Mining Rules.

By: S. Scott Carlson, PE, Twin Peaks, P.C.
P.E. Number & State: 187727 UTAH

Affix Signature, Stamp and Date



QUARTERLY INSPECTION FORM – IMPOUNDMENT

Permit Number: C/007/042
Mine Name: Star Point Waste Fuel
Mine Operator (Permittee): Sunnyside Cogeneration Associates
MSHA ID Number: N/A
Impoundment Name: **Sediment Pond #009**
UPDES Permit Number: UTG040025

Inspection Date: Dec 17, 2014
Annual 2014
Inspector: Rusty Netz
Signature: Rusty Netz

IMPOUNDMENT INSPECTION

1. Describe any appearance of any instability, structural weakness, or any other hazardous condition.

None

a. Sediment storage capacity, including elevation of 60% and 100% sediment storage volumes, and estimated average elevation of existing sediment.

Total Pond Volume = 7.4 Acre-feet
Pond bottom elevation = 7435.0
100% Sediment Storage Volume = 2.02 acre-feet at Elevation 7439.3
60% sediment Storage Volume = 1.21 acre feet at Elevation = 7437.7
Existing Average Sediment Elevation = 7436.5 +/-

b. Principle and emergency spillway elevations.

Primary Dewatering Orifice = 7439.8
Primary Spillway Elevation = 7445.5
Emergency Spillway Elevation = 7446.5

2. Field Information

Provide current water elevation, whether pond is discharging, type and number of samples taken, monitoring/ instrumentation information, inlet/ outlet conditions, or other related activities associated with the pond including but not limited to sediment cleanout, pond decanting, embankment erosion/ repairs, monitoring information, vegetation on outslopes of embankments, etc.

Pond had no water. No samples were taken. Pond did not require decanting.
Sediment levels were reasonable.
Embankment conditions were good. Vegetation on outslopes was adequate.
Inlet / Outlet conditions were good. No structural or hazardous conditions were observed.

3. Field Evaluation.

Describe any changes in the geometry of the impounding structure, average and maximum depths and elevation of impounded water, estimated sediment or slurry volume and remaining storage capacity, estimated volume of water impounded, and any other aspect of the impounding structure affecting its stability or function which has occurred during the reporting period

No recent changes in the geometry of the structure have been observed
No water was impounded Sediment level was good.
No other aspects of the impounding structure were observed that could affect its stability or functionality.

QUARTERLY INSPECTION FORM – IMPOUNDMENT

Sediment Pond 009

CERTIFIED REPORT
IMPOUNDMENT EVALUATION

If you answer NO to these questions, please explain under comments

1. Is impoundment designed and constructed in accordance with the approved plan? YES
2. Is impoundment free of instability, structural weakness, or any other hazardous conditions? YES
3. Has the impoundment met all applicable performance standards and effluent limitations from the previous date of inspection? YES

COMMENTS/ OTHER INFORMATION

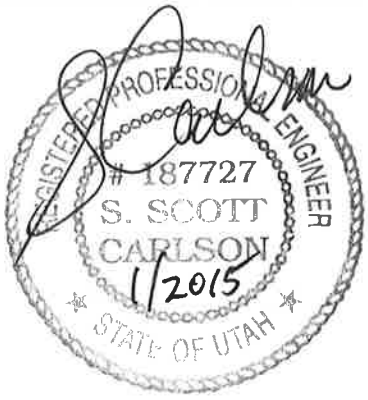
August storms caused some culverts within the Pond 009 drainage area to accumulate sediment. During an inspection, UDOGM issued NOV 12148. SCA completed an internal evaluation of culvert needs, submitted a permit amendment, cleaned ditches and removed unneeded culverts in the area. All diversions and culverts in this drainage 009 area functioned well during the late September storms experienced. DOGM approved the amendment submitted to remove unneeded culverts in December.

CERTIFICATION STATEMENT:

I hereby certify that: I am experienced in the construction of impoundments; I am qualified and authorized in the State of Utah to inspect and certify the condition and appearance of impoundments in accordance with the certified and approved designs for this structure; that the impoundment has been maintained in accordance with approved designs and meets or exceeds the minimum design requirements under all applicable federal, state and local regulations; and that inspections and inspection reports are made by myself or under my direction and include any appearances of instability, structural weakness or other hazardous conditions of the structure affecting stability in accordance with the Utah R645 Coal Mining Rules.

By: S. Scott Carlson, PE, Twin Peaks, P.C.
P.E. Number & State: 187727 UTAH

Affix Signature, Stamp and Date



QUARTERLY INSPECTION FORM – REFUSE PILE

Permit Number: C/007/042
Mine Name: Star Point Waste Fuel
Mine Operator (Permittee): Sunnyside Cogeneration Associates
MSHA ID Number: Abandoned by MSHA Jan 2004
Facility Name: **Coarse Refuse Pile**

Inspection Date: Dec 17, 2014
Annual 2014
Inspector: Rusty Netz
Signature: Rusty Netz

1. Describe any changes in the geometry of the structure (as well as instrumentation, if any, used to monitor changes): **Refuse material is actively being excavated and removed from locations across the top of the pile**
2. Lift Height / Thickness Avg **15** Maximum **25** Elevation of Active Benches: **approximately 7460-7490**
3. Vertical angle of outslope(s) / Location(s) where measured **max 2:1 North, East and South faces**
4. Current estimated volume: **approx 3.0-3.3 Million tons** Volume removed during year: **2013: approx. 356,486 tons**
5. Describe foundation preparation, (including the removal of vegetation, stumps, topsoil, and all organic material): **NA**
6. Describe Placement and compaction of fill materials (including an explanation of how compaction is confirmed): **N/A - Activities occurring at this time are associated with removal of refuse material**
7. Is there any evidence of fires or burning on the structure? (if Yes, specify extent, location , and abatement / extinguishment of such fires): **No evidence of fires observed**
8. Describe placement of underdrains and protective filter systems, and final surface drainage systems (report any seepage, including location, color, flow): **No underdrains exist. Current surface drainage is in place. No seepage is visible**
9. Describe any appearances of instability, structural weakness, and other hazardous conditions **No aspects of the Fill structure were observed that could affect its stability or functionality or which indicated hazardous conditions**
10. Please provide any other information pertaining to the stability of the structure (attach any photos taken during the inspection)
    a. Are there any cracks or scarps in crest? **NO** – **none observed**
    b. Is there any detectable sloughing or bulging? **NO** – **none observed**
    c. Do slope erosion problems exist? **NO** – **some old erosion gullies exist on the outer slopes, but currently appear stable**
    d. Cracks or scarps in slope? **NO** – **none observed**
    e. Surface movements? (valley bottom, hillsides) **NO** – **none observed**
    f. Erosion of Toe? **NO** – **none observed**
    g. Water impounded by structure? **NO** – **none observed**
    h. Are diversion ditches stable? **YES** – **appears reasonable**
    i. Is drainage positive? **YES** – **surface runoff flows to culverts & ditches. During the 2nd quarter NOV 10139 was received & abated. This NOV pertained to an uphill ditch which had been partially reclaimed but which allowed the non reclaimed portion to discharge water onto the refuse pile. The NOV required the ditch to be restored through the reclaimed area. During the 3rd quarter significant storms caused erosion in some locations. Conditions have been repaired.**
    j. Could failure of structure create an impoundment (provide description)? **No surface water flows exist in the vicinity**
    k. Are design standards established within the mining and reclamation plan for the disposal facility being met? **Yes**
    l. Proctor Determination: **none required**

I hereby certify that: I am experienced in the construction of earth and rock fills; I am qualified and authorized in the State of Utah to inspect and certify the condition and appearance of earth and rock fills in accordance with the certified and approved designs for this structure; that the fill structure has been maintained in accordance with the approved design and meets or exceeds the minimum design requirements under all applicable federal, state, and local regulations; and, that inspections and inspection reports are made by myself or under my direction and include any appearances of instability, structural weakness or other hazardous conditions of the structure affecting stability.

By: S. Scott Carlson, PE, Twin Peaks, P.C.
P.E. Number & State: 187727 UTAH

Affix Signature, Stamp and Date

REGISTERED PROFESSIONAL ENGINEER
187727
S. SCOTT CARLSON
1/2015
STATE OF UTAH

INSPECTION AND CERTIFIED REPORT ON EXCESS SPOIL PILE OR REFUSE PILE

Permit Number: C/007/042
Mine Name: Star Point Waste Fuel
Mine Operator (Permittee): Sunnyside Cogeneration Associates
MSHA ID Number: NA
Facility Name: **Disposal Area**

Inspection Date: Dec 17, 2014
Annual 2014
Inspector: Rusty Netz
Signature: Rusty Netz

1. Describe any changes in the geometry of the structure (as well as instrumentation, if any, used to monitor changes): **No material was placed in this disposal area during the quarter**
2. Lift Height / Thickness Avg **40-60 ft** Maximum **60 ft** Elevation of Active Benches: **approximately 7480**
3. Vertical angle of outslope(s) / Location(s) where measured **max 4:1**
4. Total storage capacity: **145K cuyd** Remaining storage capacity **estimated 140K cuyd** Volume placed during year: **None**
5. Describe foundation preparation, (including the removal of vegetation, stumps, topsoil, and all organic material): **Organic material is removed as needed. No topsoil existed since this was a previously disturbed location**
6. Describe Placement and compaction of fill materials (including an explanation of how compaction is confirmed): **Material is generally granular by nature so it is placed, spread by dozer and compacted by wheel rolling**
7. Is there any evidence of fires or burning on the structure? (if Yes, specify extent, location , and abatement / extinguishment of such fires): **No evidence of fires observed**
8. Describe placement of underdrains and protective filter systems, and final surface drainage systems (report any seepage, including location, color, flow): **No underdrains exist. Surface drainage flows to adjacent ditches and to Sediment Pond #009. No seepage is visible**
9. Describe any appearances of instability, structural weakness, and other hazardous conditions **No aspects of the Fill structure were observed that could affect its stability or functionality or which indicated hazardous conditions**
10. Please provide any other information pertaining to the stability of the structure (attach any photos taken during the inspection)
    a. Are there any cracks or scarps in crest? **NO none observed**
    b. Is there any detectable sloughing or bulging? **NO none observed**
    c. Do slope erosion problems exist? **NO erosion conditions are minimal**
    d. Cracks or scarps in slope? **NO none observed**
    e. Surface movements? (valley bottom, hillsides) **NO none observed**
    f. Erosion of Toe? **NO none observed**
    g. Water impounded by structure? **NO none observed**
    h. Are diversion ditches stable? **YES appears reasonable**
    i. Is drainage positive? **YES surface runoff flows to collection ditches**
    Some culverts in the vicinity of this disposal area were removed during the 3rd quarter to reduce maintenance needs and improve storm runoff flow capability
    j. Could failure of structure create an impoundment (provide description)? **No surface water flows exist in the vicinity**
    k. Are design standards established within the mining and reclamation plan for the disposal facility being met? **Yes**
    l. Proctor Determination: **none required**
11. Provide copies of sample analysis for material placed in the fill. **No new material has been placed in this disposal area for several years.**

I hereby certify that: I am experienced in the construction of earth and rock fills; I am qualified and authorized in the State of Utah to inspect and certify the condition and appearance of earth and rock fills in accordance with the certified and approved designs for this structure; that the fill structure has been maintained in accordance with the approved design and meets or exceeds the minimum design requirements under all applicable federal, state, and local regulations; and, that inspections and inspection reports are made by myself or under my direction and include any appearances of instability, structural weakness or other hazardous conditions of the structure affecting stability.

By: S. Scott Carlson, PE, Twin Peaks, P.C.
P.E. Number & State: 187727 UTAH
Affix Signature, Stamp and Date

REGISTERED PROFESSIONAL ENGINEER
187727
S. SCOTT CARLSON
1/2015
STATE OF UTAH

SCA- Star Point Refuse Pile and surrounding area Aug 15, 2014

Sediment Pond 009 Aug 15, 2014

Sediment Pond 005 Aug 15, 2014

Sunnyside Cogeneration Associates

P.O. Box 10, East Carbon, Utah 84520 • (435) 888-4476 • Fax (435) 888-2538

October 20, 2014

Mike Herkimer
Division of Water Quality
195 North 1950 West
Salt Lake City, Utah 84116

RE: October 2014, UPDES Compliance Report
September 2014, Monitoring Period
UPDES Permit No. UTG040025
Discharge Monitoring Report
Sunnyside Cogeneration Associates

Dear Mr. Herkimer:

This letter summarizes the UPDES-Permit field activities at Sunnyside's Star Point Facility during September 2014. Rusty Netz, the Plant Engineer for the facility, has physically inspected the permit outfalls in accordance with the UPDES permit guidelines.

On September 29, 2014, Pond 005 at the Star Point Facility, discharged due to continuing precipitation events. The discharge lasted for approximately eight (8) hours. The discharge was sampled for parameters in accordance with Sections I.E.1 Thru I.E.3 of SCA's UPDES Permit. No permit limits for Pond 005 were in violation.

Again, the discharge event only lasted for approximately an 8-hour period, and no discharge has occurred since. Attached are the discharge sampling results and the discharge monitoring reports.

If you have any questions concerning this report, please contact Rusty Netz or myself at (435) 888-4476.

Thank You,

Gerald Hascall
Agent for
Sunnyside Cogeneration Associates

Cc: Rusty Netz
Plant Files

PERMITTEE NAME/ADDRESS:

Name: SUNNYSIDE COGENERATION ASSOCIATES
Address: #1 POWER PLANT ROAD
SUNNYSIDE UT. 84539

Facility: STAR POINT REFUSE
Location: WATTIS UT. 84501

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

FORM APPROVED
OMB No. 2040-0004

UTG040025	005 A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD FROM 9/1/2014 TO 9/30/2014

MINOR

F - FINAL

SEDITMENTATION POND
Discharge to SERVICE BERRY CREEK
*** NO DISCHARGE

PARAMETER		QUANTITY FOR LOADING AVERAGE	QUANTITY FOR LOADING MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
FLOW RATE 00056 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.03	0.03	MGD	**********	**********	**********	*******	0	1/30	MEASURED
	PERMIT REQUIREMENT	1 REPORT 30DAY AVG.	DAILY MAX.		**********	**********	**********			ONCE/ MONTH	MEASURED
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********	**********	*******	7.58	**********	7.58	SU	0	1/30	GRAB
	PERMIT REQUIREMENT	**********	**********		6.5 MINIMUM	**********	9.0 MAXIMUM			ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********	**********	*******	49	49	49	MG/L	0	1/30	GRAB
	PERMIT REQUIREMENT	**********	**********		25 30DAY AVE.	35 MAX. 7 DAY AVE.	70 DAILY MAX.			ONCE/ MONTH	GRAB
OIL AND GREASE 03582 0 0 0 SEE COMMENT BELOW	SAMPLE MEASUREMENT	**********	**********	*******	**********	**********	<5	MG/L	0	1/30	GRAB
	PERMIT REQUIREMENT	**********	**********		**********	**********	10 DAILY MAX.			ONCE/ MONTH	GRAB
SOLIDS, TOTAL DISSOLVED 70295 P 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	**********	**********	*******	**********	492	**********	MG/L	0	1/30	GRAB
	PERMIT REQUIREMENT	**********	**********		**********	REPORT 30DAY AVG.	**********			ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********	**********	*******	**********	**********	0.28	MG/L	0	1/30	GRAB
	PERMIT REQUIREMENT	**********	**********		**********	**********	1.0 DAILY MAX.			ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE (AS ZN) 01090 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********	**********	*******	**********	**********	<0.1	ML/L	0	1/30	GRAB
	PERMIT REQUIREMENT	**********	**********		**********	**********	0.5 DAILY MAX.			ONCE/ MONTH	GRAB
OIL SHEEN, FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 45613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********	0	Y=1 N=0	**********	**********	**********	*******	0	1/30	VISUAL
	PERMIT REQUIREMENT	**********	0 DAILY MAX.		**********	**********	**********			ONCE/ MONTH	VISUAL
SANITARY WASTE DISCHARGED-ASSESSMENT 45614 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********	0	Y=1 N=0	**********	**********	**********	*******	0	1/30	VISUAL
	PERMIT REQUIREMENT	**********	0 DAILY MAX.		**********	**********	**********			ONCE/ MONTH	VISUAL
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Gerald Hascall	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.	Gerald Hascall	(435)	888-4476	10/20/2014
TYPE OF PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR/MO/DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

IF AN OIL AND GREASE SHEEN IS OBSERVED A SAMPLE MUST BE TAKEN. THIS SHALL NOT EXCEED 10 MG/L.
SETTLEABLE SOLIDS SHALL BE LIMITED INSTEAD OF TSS DURING RUNOFF EVENTS CAUSED BY LESS THAN THE 10 YEAR/24 HOUR PRECIPITATION EVENT.
ENTER N.A. WHEN NOT APPLICABLE.
IF 30 DAY AVERAGE TDS OF 500 MG/L CANNOT BE ACHIEVED AT EACH OUTFALL, THEN PERMITTEE IS LIMITED TO ONE TON (2000 LBS) PER DAY AS SUM OF ALL OUTFALLS.

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS:

Name: SUNNYSIDE COGENERATION ASSOCIATES
Address: #1 POWER PLANT ROAD
SUNNYSIDE UT. 84539

Facility: STAR POINT REFUSE
Location: WATTIS UT. 84501

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

FORM APPROVED
OMB No. 2040-0004

UTG040025	006 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR

F - FINAL

SEDITMENTATION POND
Discharge to SERVICE BERRY CREEK
*** NO DISCHARGE [X]

MONITORING PERIOD
FROM 9/1/2014 TO 9/30/2014

PARAMETER		QUANTITY FOR LOADING AVERAGE	QUANTITY FOR LOADING MAXIMUM	QUANTITY FOR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
FLOW RATE 00056 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				**********	**********	**********				
	PERMIT REQUIREMENT	REPORT 30DAY AVG.	DAILY MAX.	MGD	**********	**********	**********	*******		ONCE/ MONTH	MEASURED
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********	**********			**********					
	PERMIT REQUIREMENT	**********	**********	*******	6.5 MINIMUM	**********	9.0 MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********	**********								
	PERMIT REQUIREMENT	**********	**********	*******	25 30DAY AVE.	35 MAX. 7 DAY AVE.	70 DAILY MAX.	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE 03582 0 0 0 SEE COMMENT BELOW	SAMPLE MEASUREMENT	**********	**********		**********	**********					
	PERMIT REQUIREMENT	**********	**********	*******	**********	**********	10 DAILY MAX.	MG/L		ONCE/ MONTH	GRAB
SOLIDS, TOTAL DISSOLVED 70295 P 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	**********	**********		**********		**********				
	PERMIT REQUIREMENT	**********	**********	*******	**********	REPORT 30DAY AVG.	**********	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********	**********		**********	**********					
	PERMIT REQUIREMENT	**********	**********	*******	**********	**********	1.0 DAILY MAX.	MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE (AS ZN) 01090 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********	**********		**********	**********					
	PERMIT REQUIREMENT	**********	**********	*******	**********	**********	0.5 DAILY MAX.	ML/L		ONCE/ MONTH	GRAB
OIL SHEEN, FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 45613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********			**********	**********	**********				
	PERMIT REQUIREMENT	**********	0 DAILY MAX.	Y=1 N=0	**********	**********	**********	*******		ONCE/ MONTH	VISUAL
SANITARY WASTE DISCHARGED-ASSESSMENT 45614 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********			**********	**********	**********				
	PERMIT REQUIREMENT	**********	0 DAILY MAX.	Y=1 N=0	**********	**********	**********	*******		ONCE/ MONTH	VISUAL
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Gerald Hascall	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.		(435)	888-4476	10/20/2014
TYPE OF PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR/MO/DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

IF AN OIL AND GREASE SHEEN IS OBSERVED A SAMPLE MUST BE TAKEN. THIS SHALL NOT EXCEED 10 MG/L.
SETTLEABLE SOLIDS SHALL BE LIMITED INSTEAD OF TSS DURING RUNOFF EVENTS CAUSED BY LESS THAN THE 10 YEAR/24 HOUR PRECIPITATION EVENT.
ENTER N.A. WHEN NOT APPLICABLE.
IF 30 DAY AVERAGE TDS OF 500 MG/L CANNOT BE ACHIEVED AT EACH OUTFALL, THEN PERMITTEE IS LIMITED TO ONE TON (2000 LBS) PER DAY AS SUM OF ALL OUTFALLS.

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS:

Name: SUNNYSIDE COGENERATION ASSOCIATES
Address: #1 POWER PLANT ROAD
SUNNYSIDE UT. 84539

Facility: STAR POINT REFUSE
Location: WATTIS UT. 84501

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

FORM APPROVED
OMB No. 2040-0004

UTG040025	009 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR

F - FINAL
SEDITMENTATION POND
Discharge to SERVICE BERRY CREEK
*** NO DISCHARGE [X]

MONITORING PERIOD FROM 9/1/2014 TO 9/30/2014

PARAMETER		QUANTITY FOR LOADING AVERAGE	QUANTITY FOR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
FLOW RATE 00056 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				**********	**********	**********				
	PERMIT REQUIREMENT	1 REPORT 30DAY AVG.	DAILY MAX.	MGD	**********	**********	**********	*******		ONCE/ MONTH	MEASURED
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********	**********			**********					
	PERMIT REQUIREMENT	**********	**********	*******	6.5 MINIMUM	**********	9.0 MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********	**********								
	PERMIT REQUIREMENT	**********	**********	*******	25 30DAY AVE.	35 MAX. 7 DAY AVE.	70 DAILY MAX.	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE 03582 0 0 0 SEE COMMENT BELOW	SAMPLE MEASUREMENT	**********	**********		**********	**********					
	PERMIT REQUIREMENT	**********	**********	*******	**********	**********	10 DAILY MAX.	MG/L		ONCE/ MONTH	GRAB
SOLIDS, TOTAL DISSOLVED 70295 P 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	**********	**********		**********		**********				
	PERMIT REQUIREMENT	**********	**********	*******	**********	REPORT 30DAY AVG.	**********	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********	**********		**********	**********					
	PERMIT REQUIREMENT	**********	**********	*******	**********	**********	1.0 DAILY MAX.	MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE (AS ZN) 01090 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********	**********		**********	**********					
	PERMIT REQUIREMENT	**********	**********	*******	**********	**********	0.5 DAILY MAX.	ML/L		ONCE/ MONTH	GRAB
OIL SHEEN, FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 45613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********			**********	**********	**********				
	PERMIT REQUIREMENT	**********	0 DAILY MAX.	Y=1 N=0	**********	**********	**********	*******		ONCE/ MONTH	VISUAL
SANITARY WASTE DISCHARGED-ASSESSMENT 45614 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**********			**********	**********	**********				
	PERMIT REQUIREMENT	**********	0 DAILY MAX.	Y=1 N=0	**********	**********	**********	*******		ONCE/ MONTH	VISUAL
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Gerald Hascall	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.	Gerald Hascall	(435)	888-4476	10/20/2014
TYPE OF PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR/MO/DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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Address: #1 POWER PLANT ROAD
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Facility: STAR POINT REFUSE
Location: WATTIS UT. 84501

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

FORM APPROVED
OMB No. 2040-0004

MINOR

UTG040025 — PERMIT NUMBER

SUM A — DISCHARGE NUMBER

F - FINAL
TOTAL OF ALL OUTFALLS
Discharge to SERVICE BERRY CREEK
*** NO DISCHARGE

MONITORING PERIOD FROM 9/1/2014 TO 9/30/2014

PARAMETER		QUANTITY FOR LOADING AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL DISSOLVED 70295 P 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*************	130.1	LBS/DAY	*************	*************	*************	******	0	1/30	GRAB
	PERMIT REQUIREMENT	*************	2000 DAILY MAX.		*************	*************	*************			ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Gerald Hascall
TYPE OF PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.

[signature]
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE
(435)	888-4476	10/20/2014
AREA CODE	NUMBER	YEAR/MO/DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

IF TDS IS 500 MG/L OR LESS AT EACH OUTFALL ENTER N.A. FOR SUM A.

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

SGS

Analysis Report

October 16, 2014

SUNNYSIDE COGENERATION FAC
PO BOX 10
EAST CARBON UT 84520

Client Sample ID:	005-STAR	Sample ID By:	Sunnyside Cogeneration Assoc.
Date Sampled:	Sep 29, 2014	Sample Taken At:	005 - STAR
Date Received:	Sep 30, 2014	Sample Taken By:	RN
Product Description:	WATER	Time Sampled:	1300
		Time Received:	1100
		Mine:	27

SGS Minerals Sample ID: 782-1426333-001

TESTS	RESULT	UNIT	METHOD	REPORTING LIMIT	ANALYZED DATE	ANALYZED TIME	ANALYST
Oil and Grease, (HEM)	<5	mg/L	EPA 1664A	5	2014-10-10	08:00:00	AL
pH	7.58		SM4500-H	0.01	2014-09-30	12:30:00	AL
pH Temperature	18.60	°C	SM4500-H	0.01	2014-09-30	12:30:00	AL
Settleable Solids	<0.1	mL/L	SM2540-F a	0.1	2014-09-30	12:15:00	AL
Total Dissolved Solids	492	mg/L	SM2540-C	30	2014-10-02	15:50:00	AL
Total Suspended Solids	49	mg/L	SM2540-D	5	2014-10-03	15:50:00	AL
METALS BY ICP							
Iron, Fe - Total	0.28	mg/L	EPA 200.7	0.05	2014-10-08	13:35:00	AL

Lab Supervisor

Domenic Ibanez
Lab Supervisor

SGS North America Inc. | Minerals Services Division
2035 North Airport Road Huntington UT 84528 t (435) 653-2311 f (435)-653-2436 www.sgs.com/minerals